

SILVER CITY GARDENS SUPPORTIVE LIVING – OUTCOMES REPORT APRIL 1 2017 – MARCH 31 2018

PROGRAM DESCRIPTION – Silver City Gardens consists of thirty-four supportive housing units available to low-to-moderate income seniors who are able to direct their own care and whose health is better managed by support and care received within a community setting. Core hospitality services provided include one primary meal per day, light housekeeping services, social and recreational opportunities, and access to 24-hour daily response buttons.

PURPOSE – This report is intended for board, management, program staff, stakeholders and persons served. Feedback and suggestions to assist with continuous quality improvement planning are both solicited and encouraged.

| Key Demographics | 2013 2014 | 2014 2015 | 2015 2016 | 2016 2017 | 2017 2018 | 5 Year Comparative Average | Findings |
|---|--------------|--------------|--------------|--------------|--------------|----------------------------------|---|
| Number of males served | 7 | 3 | 6 | 12 | 18 | 9.2 | <p>There continues to an increase in the number of male tenants housed year over year.</p> <p>There appears to be a trend over the past 2 years indicating the average of tenants is decreasing. Definite increase in deceased tenants this year, this may be contributed to tenants simply aging in place. Findings indicate a decrease in minorities, this may be to the remote location of Silver City Gardens</p> |
| Number of females served | 28 | 27 | 30 | 28 | 49 | 28.8 | |
| Total | 35 | 30 | 36 | 40 | | 38 | |
| Average age of tenants | 84 yrs. | 85 yrs. | 84 yrs. | 81 yrs. | 75 Yrs. | 82 yrs. | |
| Average length of service | 3 yrs. | 4 yrs. | 4 yrs. | 4 yrs. | 3 | 4 yrs. | |
| Number of tenants who moved to higher care facilities | 4 | 4 | 4 | 3 | 4 | 4 | |
| Number of deceased tenants | 4 | 2 | 6 | 4 | 10 | 5 | |
| Number of tenants who returned to a non-supportive living environment | 1 | 0 | 0 | 1 | 1 | 1 | |
| Percentage of minorities served | 6% | 6% | 4% | 0% | 0% | 3% | |



| File Status at Year End | 2013 2014 | 2014 2015 | 2015 2016 | 2016 2017 | 2017 2018 | 5 Year Comparative Average | Findings |
|-------------------------|--------------|--------------|--------------|--------------|--------------|----------------------------------|---|
| Open | 34 | 32 | 32 | 33 | 34 | 33 | The number of closed file can be linked to the increase in deaths and the need for higher care facilities |
| Closed | 9 | 6 | 10 | 8 | 15 | 10 | |

| Risks & Barriers | 2013 2014 | 2014 2015 | 2015 2016 | 2016 2017 | 2017 2018 | 5 year Comparative Average | Findings |
|---|--------------|--------------|--------------|--------------|--------------|----------------------------------|--|
| % experiencing significant barriers as a result of English as a second language / cultural issues | 0% | 0% | 3% | 0% | 0% | 1% | This year, there is a notable increase in Tenant's experiencing long term mental health problems. This may be contributed to the increase of PWD tenant's at Silver City |
| % experiencing significant barriers based on mental health issues or anti-social behaviors | 0% | 17% | 13% | 40% | 35% | 21% | |
| % experiencing long term mental health problems | 11% | 7% | 8% | 28% | 35% | 18% | |
| % significantly involved in alcohol or drug misuse | 6% | 6% | 6% | 13% | 14% | 9% | |
| % experiencing significant barriers based on increasing physical and health needs. | - | - | - | 60% | 50% | 55% | |

REFERRAL ELSEWHERE: Whenever risks and barriers such as those indicated above become prevailing factors, the Manager ensures appropriate community referral sources are identified and connections made. Housing staff work collaboratively with tenants to maintain safe, affordable housing for as long as possible. Referral records indicate that 4 tenants were referred to other higher care facilities while a further 5 tenants became deceased during their tenancy. Silver City Gardens' services allow tenants to age in place longer and to not become hospitalized prematurely. These services, which afford access to architecturally safe housing, a nutritional daily meal, light housekeeping services, and socialization opportunities assist tenants to maximize their access to external community services and thus remain independent longer.



GOAL SETTING & RESULTS: Service outcomes are intended to assess the safety and affordability of the living environment, quality of hospitality services, and value of social opportunities provided. Services outcomes are reported in the table below and represent current tenants and in some questions also tenants who have ended tenancy during the year.

| Objective: Effectiveness Measures | Indicator | Who Applied to | Actual Result | Met or Exceeded |
|--|---|---|---|-----------------|
| 1. Promote aging in place | 50% of tenants of SCG have held a tenancy longer than 12 months on March 31st 2018 | SCG tenants | 50% (20 of 40) | ✓ |
| 2. Maintain health and minimize hospital visits | 52% of tenants who resided in SCG from April 1/17to March 31/18 were not hospitalized longer than 24 hrs. | SCG tenants | 52% (22 of 40) | ✓ |
| 3. Maximize involvement in social and community activities | 79% of tenants of SCG are involved in 2 or more social activities each week (both on and off site) over the 12 mo. period | SCG tenants | 79% (23 of 35) (current tenants only as of Mar 31 2018) | ✓ |
| <p>Findings: 50% of the targeted 70% of SCG tenants sustained their housing throughout the year. Staff monitored hospital visits/stays of tenants and determined that 52% were not hospitalized through the course of the year. All hospitalizations that did occur for more than 24 hours were due to health issues and 4 were due to higher level of care required. Of the 4 requiring a higher level of care and transferred to complex care 3 became deceased shortly thereafter. 79% of tenants regularly attended social activities both on and off site. Examples of activities include, but are not limited to: bingo, church, sit-and-be fit, card games, coffee club, musical entertainment, senior center activities, aquatic center exercise programs and health seminars, and Interior Health day program. Data is indicating that tenants are remaining at SCG until transfer to higher level of care or through to end of life demonstrates tenants are successfully aging in place.</p> | | <p>Recommendations: Continue to promote aging in place and maintain tenant health particularly through nutrition, appropriate referrals to community health care supports, and social involvement on and off site. Continue to monitor hospital stays and promote community involvement so that tenants remain active and the potential of isolation is reduced.</p> | | |

PAST PARTICIPANT FEEDBACK – Past participant feedback is intended to solicit feedback from tenants after they have left the program. However, due to the natural aging and end of the life cycle reality, we are for the most part unable to obtain past participant. The number of files closed due to tenant moving on to higher care facilities and tenant death was 14.

PROGRAM EFFICIENCIES –Two efficiency measures were selected by staff. The first efficiency measure was to monitor occupancy rates. The target occupancy goal established was 99%. The second was to monitor food costs without compromising nutritional value and, as such, the costs per person, per meal, per day were documented. The target goal established was to maintain food costs at budgeted levels (at a projected 13% increase per person) without compromising nutrition. Efficiency results have been tabulated below.

| Objective: Efficiency Measure | Indicator | Who Applied to | Target Goal Expectancy | Actual Result | Met or Exceeded |
|---|---|----------------|---|---|-----------------|
| 1. Maintain occupancy at 99% | Occupancy rate | SCG Units | 99% | 97% | ✘ |
| 2. Maintain costs of food service without compromising nutrition | Meal cost per person, per day does not increase by more than at 13% | SCG Tenants | 13% increase over prior year per person, per meal, per day | 7.3% increase per meal, per person, per day over year | ✓ |
| Findings: i. There are a total of 34 units available at SCG. During the course of the 12 month reporting period there was a total of 12 vacant units for the year. In calculating the occupancy / vacancy rates our formula is as follows: 12 vacant units / 408 total units =2.94% vacancies. The corresponding occupancy rate is 97%. This is the result of a larger turn-over in tenants this year due primarily to aging tenants who either went on to higher care or were deceased. ii. The meal costs are tracked monthly to determine average cost pp/ per day. This year the cost per person per meal increased by 7.3% which is well under the targeted 13% increase? This is due in part to our endeavors to be more health conscious by moving away from, whenever possible, the use of preserved or processed foods. During the year we chose to make more ‘in house’ prepared foods (i.e. homemade desserts, sauces, salad dressings, etc.) with the goal to provide an enhanced nutritional diet to tenants. | | | Recommendations: Staff will continue to monitor and attempt to achieve an occupancy rate of 99% for the 2018-19 year. Staff will continue to comparison shop and keep processed food purchases to a minimum. This will result in continued healthy dietary intake for tenants and maintain reasonable food purchase costs. Staff will strive to average a meal cost per person at a rate that does not exceed a 13% increase over the year while also ensuring these efficiencies do not compromise nutritional value. | | |

PROGRAM SATISFACTION

| Objective: Consumer Input Measures | Indicator | Who Applied to | Target Goal Expectancy | Actual Result | Met or Exceeded |
|---|--|--|------------------------|-------------------|-----------------|
| 1.To maintain personal safety levels | Persons served report overall safety satisfaction in their apartment | All Tenants accessing services who responded to the survey | 85% | 88% (15 of 17) | ✓ |
| Objective Stakeholder Input Measures | Indicator | Who Applied to | Target Goal Expectancy | Actual Result | Met or Exceeded |
| 2. To maintain stakeholder satisfaction levels | Stakeholders who report overall service satisfaction | All stakeholders responding to survey (6 sent 5 returned) | 85% | 100% (5 of 5) | ✓ |
| Findings: 34 satisfaction surveys were distributed and 15 were returned. Of these, 15 tenants rated their personal safety at SCG as good, satisfactory, or NA. It is important to recognize that this information is gathered from a tenant's opinion on their safety. All apartment unit doors are lockable and the building is locked after business hours and on weekends for security. Additionally all doors were rekeyed this year and strict key rules are in place Five of 6 stakeholders surveyed reported a positive working relationship with staff and were comfortable with approaching staff when needed. | | Recommendations: 1) Continue to be open to tenant feedback and work with staff to achieve continuous quality improvement. Continue to have onsite staff strive to receive more tenant feedback responses by bringing the surveys individually to each tenant and whenever appropriate assist by recording their responses. 2) Continue to maintain good relationships with stakeholders and community members. Plan to solicit two stakeholders' feedback surveys per month to increase feedback rates. | | | |



PROGRAM ACCESSIBILITY: The Silver City Gardens application process was transferred to the BC Housing website in late 2014 to expand access to seniors for housing. Interior Health Authority staff and other community partners (including Home Health, Mental Health and Substance Use and Acute Care services) were given information regarding the new application process. In addition, ads are placed in media outlets when marketing Silver City Gardens directing people to the BC Housing Registry. Understanding the needs the population being served, when family supports are unavailable staff will provide assistance in order to complete registry applications through the internet.

| Objective Type: Access Measures | Indicator | Who Applied To | Target Goal Expectancy | Actual Result | Met or Exceeded |
|---|---|---|---|--------------------|-----------------|
| 1. To increase access to health and personal care | 100% of tenants who connected with appropriate services | Tenants with identified needs | 80% | 100% (7 of 7) | ✓ |
| 2. Housing Registry Waitlist | % of tenant on waitlist to receive housing | All tenants on the waitlist that received housing in the fiscal | 100% | 100% (15 of 15) | ✓ |
| Findings: This objective was achieved by monitoring tenants that receive on and off site care services. Data shows that necessary referrals were made 100% of the time. Also, a community resource information area and bulletin board were maintained which increased tenant education on community supports. Fourteen of 15 tenants who made application on the Housing Registry waitlist were housed at Silver City Gardens. | | | Recommendations: Continue to build relationships with seniors' community services representatives as there is an increase in the number of tenants who require additional services in order to remain independent as they age in place. | | |

ADMINISTRATIVE OBJECTIVES

| Objective Type: Administration Objective | Indicator | Who Applied To | Actual Result | Administrative Objective Achieved |
|--|---|--|--|-----------------------------------|
| 1. Expand staff development opportunities | Key duties of staff positions and routines reviewed and updated | SCG Staff | Staff rolls were also reviewed and discussed as part of an ongoing assessment on site to help staff find efficiencies. | ✓ |
| 2. Develop and build the distribution, return rates, and collection of statistical information for both tenants and non-tenant stakeholders. | Increased survey response and feedback rates for 2017-2018 year | Trail Services Property and Operations Manager | Staff again attempted to distribute surveys to the tenants and was successful in slightly increasing the results from last year for both the tenant feedback and the stakeholder survey. | ✗ |
| 3. Track an additional risk or barrier will be measured, for tenants experiencing barriers due to increasing physical and health needs | Inclusion of tracking data on the 2017-2018 | Trail Operations Manager Annual Report | A measurement was added this year to track physical health barriers. | ✓ |
| Findings: 1) Expanded training opportunities were provided to staff as well as their positions and roll responsibilities were reviewed and updates through staff meetings. 2) Survey feedback results were slightly increased from the previous year. 3) The tracking of increased physical barriers to housing was adding to the annual report | | | Recommendations: 1) continue to look for ways to develop staff and support them when development opportunities are reasonable. 2) Carry over the administrative goal of expanded survey feedback form with a target of 50% tenant survey return and minimum of 15 stakeholder feedback surveys. | |

Data Confirmed by: Leisa Miness, Property and Operations Manager Trail Services
 Reviewed by Dana Hill , Director of Housing Services and Carey Fraser, Executive Director

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